EXHIBIT 3 (PART 3)

5:11-cv-306

REGARDING RESPONSE TO MOTION TO TRANSFER VENUE DECLARATION OF WILLIAM SPENT

*Added by C.O. author:	K BOCOOM INTE	Rf 13615/19	envizan 1			
claimant.		ا منا	244	EXAMINED BY	dowers	FORM VA
	AV	454	DEF	CHECKED BY	4000	
	• • • • • • • • • • • • • • • • • • • •				,	
				CORRESPONDENC	DE .	FOR COPYRIGHT
	*			103		OFFICE
						ONLY
DO NOT WRITE ABOV	E THIS LINE. IF YOU N	IEED MORE SP	ACE, USE	A SEPARATE CONTIN	UATION SHEET.	
PREVIOUS REGISTRATION Has re	gistration for this work, or	for an earlier versi	ion of this wo	ork, already been made in	the Copyright Office?	2000
☐ Yes X No If your answer is "Yes," w	why is another registration	being sought? (Ch	ieck appropri			la l
☐ This is the first published edition of a w	and the second second second second second second		m.			**
☐ This is the first application submitted b ☐ This is a changed version of the work, a				28		
If your answer is "Yes," give: Previous Rep			Registration	▼		
., , , , , , , , , , , ,						
DERIVATIVE WORK OR COMPILA						
a. Preexisting Material Identify any pre					compilation.	
		8				U
						See instructions
			and here			 before completing this space.
b. Material Added to This Work Give a	brief, general statement of	the material that l	has been add	ed to this work and in wh	nich copyright is claimed.▼	
7		1 14 14 1		18 c 32	200	1
	- 1 × 1				· · · · · · · · · · · · · · · · · · ·	
DEPOSIT ACCOUNT If the registration Name ▼	on fee is to be charged to a		established it t Number 🔻	the Copyright Office, gi	ve name and number of Account.	. "
Traine V.		recount	i italibei y			
			iju.		and the language of the	88
						
CORRESPONDENCE Give name and	address to which correspo	ndence about this	application :	should be sent. Name/Ad	dress/Apt/City/State/Zip ▼	
SPENT SADDLE	RX 4 FEED	s % u	oilli	AM C. SPE	WITE.	
15.15.1-BOX 57						
OREANA ITLLI	02554				* - 1 (Be sure to
PH, 217-468-249	Mark and the second		१९०		11.	give your daytime phone
	Area Code & Telephone N		************			■ number
CERTIFICATION* I, the undersigned	l, hereby certify that I am t	he			KILL D. C.	
Check only one ▼						
author			÷.	**		
other copyright claimant						
owner of exclusive right(s) authorized agent of						
Name of author or other cop	pyright claimant, or owner of exc	lusive right(s)				
		-				
of the work identified in this application as	nd that the statements made	e				
by me in this application are correct to the						_
Typed or printed name and date ▼ If this a						-
SPENT SADDLER	K & FEEDS .	- WILLIA	WG.	SPENTIJR date	2-15-91	
Handwilten signature ()	O. V.	1				
3 101.10		1	-15-5	\		
~ waxaa	C- April	-A-		,		
MAIL. Name ¥					Complete all necessary spaces	
CATETO	m C. SPE	TIA	7.		Sign your application in space 8 SEND ALL 1 ELEMENTS	
Number/Street/Apartment N		44,19,			IN THE SAME PACKAGE 1. Application form	
	-BOX 57				2. Nonrefundable \$20 filing fee	
WIII be City/State/ZIP ▼		y 25			in check or money order payable to Register of Copyrigh 3. Deposit material	IS
malled in window OREA	NA, ILL	., 625	54		MAIL TO Register of Copyrights	
envelope					Library of Congress Washington, D.C. 20559	
* 17 U.S.C. § 506(e): Any person who knowingly in						

^{* 17} U.S.C. § 506(e): Any person who knowingly makes a false representation of a material fact in the application for copyright registration provided for by section 409, or in any written statistical field in connection with the application, shall be fined not more than \$2,500.